PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

naroariste All further c	orrespondence including below or directed oth	o the Patent advance or	ders and notification of n) specifying a new corres	naintenance tees w	ull be mail	ed to the current of	ould be completed where correspondence address as ate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, make its own certificate of mailing or transmission.							
O45601 7590 09/20/2006 SCULLY, SCOTT, MURPHY & PRESSNER 400 GARDEN CITY PLAZA GARDEN CITY, NY 11530 DEC 1 4 1006 Certificate of Mailing or Transmission. I hereby certify that this Fee(s) Transmittal is being deposited States Postal Service with sufficient postage for first class may addressed to the Mail Stop ISSUE FEE address above, or transmitted to the USPTO (571) 273-2885, on the date indicated to the USPTO (571) 273-2885, on the date indicated to the USPTO (571) 273-2885.							deposited with the United class mail in an envelope
							(Depositor's name)
						·	(Signature)
			<u> </u>				(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.		
10//11,222 09/02/2004 Edward W. Conrad BUR920030067US1 5221						5221	
TITLE OF INVENTION: METHOD AND APPARATUS TO SEPARATE FIELD AND GRID PARAMETERS ON FIRST LEVEL WAFERS							
		-					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE		OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0		\$1700	12/20/2006
EXAMINER ART UNIT			CLASS-SUBCLASS				
MOFFAT, JONATHAN 2863			702-094000				
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1 363). (1) the same of correspondence address or indication of "Fee Address" (37 (1) the same of correspondence address or indication of "Fee Address" (37 (1) the same of correspondence address or indication of "Fee Address" (37).							
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 Anthony J. Canale				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OF COUNTY FED2 00000019 090456 10711222							
International Business Machines Corporation Armonk, New แบบเก็บสามารถ 1488.88 มห							
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.							
XAdvance Order -	of Copies	Trayment by credit card. Form F10-2036 is attached. X The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 9-0450/1B (enclose an extra copy of this form).					
			overpayment, to Depo	osit Account Numb	eD9-04:	06/1B(Unclose a	extra copy of this form).
5. Change in Entity Sta	tus (from status indicate s SMALL ENTITY stat		☐ b. Applicant is no lor	nger claiming SMA	LL ENTIT	Y status. See 37 CI	FR 1.27(g)(2).
							e assignee or other party in
Authorized Signature	/	the Film		Date	Oct	tober 13.	
Typed or printed nam	Ste	ven Fischman,	Esq.	Registration l	34 No	,594	
This collection of inform	nation is required by 37	CFR 1.311. The informati	on is required to obtain or	retain a benefit by	the public v	which is to file (and	by the USPTO to process) g gathering, preparing, and

an application. Completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.